

## Developmental Services

**In order to gather information about operational costs for residential programs, Developmental Services in partnership with MACSP are requesting that you complete the following information and submit it with your application for a Room and Board subsidy.**

Provider/Agency Name: \_\_\_\_\_

Date: \_\_\_\_\_

Provider/Agency Address: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Address of home requesting the subsidy:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Names of the home's current residents:

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_  
5. \_\_\_\_\_  
6. \_\_\_\_\_

Annualized cost information for the current fiscal year:

- Repairs and maintenance on building and equipment (other than vehicle) \_\_\_\_\_
- Snow and trash removal \_\_\_\_\_
- Lawn care \_\_\_\_\_
- Cable or satellite TV \_\_\_\_\_
- Housekeeping supplies \_\_\_\_\_
- Dietary supplies \_\_\_\_\_
- Minor furniture and equipment purchases\* \_\_\_\_\_
- Depreciation on major furniture and equipment (other than vehicle) \_\_\_\_\_
- Property and Casualty Insurance \_\_\_\_\_

\* This item is defined as “not meeting the dollar threshold for depreciation”

Signature of CEO or designate \_\_\_\_\_